ailable Copy

m, together with apple

Box ISSUE FEE Assistant Commissioner for Patents Washington, D.C. 20231



(Depositor's name)

MAILING INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE. Blocks 1 through 4 should be completed where appropriate. All further correspondence including the Issue Fee Receipt, the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Legibly mark-up with any corrections or use Block 1)

Neil A Steinberg Esq Rambus Inc 2465 Latham Street Mountain View CA GADAD Note: The certificate of mailing below can only be used for domestic mailings of the Issue Fee Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing.

Certificate of Mailing

I hereby certify that this Issue Fee Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Box Issue Fee address above on the date indicated below.

noomodin view CH 94040			Part Company				(Signature)		
APPLICATION NO.		FILING DATE	TOTAL CLAIMS	-45VE	EXAMINER AND GROUP ART UNIT			(Date) DATE MAILED	
	09/514,872	02/28/00	025	AUVE,	G		2781	09/14/00	
First Named Applicant	FARMWALD,		35 l	35 USC 154(b) term ext. = 0					

TITLE OF INVENTION

METHOD AND APPARATUS FOR CONFORGLING A SYNCHRONOUS MEMORY DEVICE controlling

÷					•				
ATTY'S DOCKET NO.	CLASS-SUBCLASS	BATCH NO.	APPLN. TYPE	SMALL ENTIT	TY FEE DUE	DATE DUE			
3 RA001C10	710-12	9.000	S24 UT)	LITY N	NO \$1210.	.00 12/14/00			
Change of correspondence address Use of PTO form(s) and Customer N			(1) the names	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent					
☐ Change of correspondence addre PTO/SB/122) attached.	ss (or Change of Correspond	ence Address form	member a reg						
☐ "Fee Address" indication (or "Fee	Address* Indication form PTC	D/SB/47) attached.	attorneys or ag	neys or agents. If no name is listed, no will be printed.					
(B) RESIDENCE: (CITY & STATE O	e is identified below, no assign propiate when an assignmen r separate cover. Completion MBUS INC. R COUNTRY) MOUN	ar on the patent. sly submitted to T a substitue for	to desug Fee						
Please check the appropriate assign individual corporation or	· · · · · · · · · · · · · · · · · · ·	(will not be printed	on the patent)	Issue Fee Advance Order - # of Copies					
The COMMISSIONER OF PATENTS A				cation identified above	ve.				
(Authorized Signature)	Neil St Reg. No. 3	einbag (Date 14.735 9-	19-00						
NOTE; The Issue Fee will not be accep or agent; or the assignee or other party Trademark Office.					WONDAF2 00000077 50	0998 09514872			
Burden Hour Statement: This form depending on the needs of the indivito complete this form should be ser	time required	01 FC:142 02 FC:561	1210.00 CH 15.00 CH						

TRANSMIT THIS FORM WITH FEE

of information unless it displays a valid OMB control number.

Patents, Washington D.C. 20231

Office, Washington, D.C. 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND FEES AND THIS FORM TO: Box Issue Fee, Assistant Commissioner for

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection